## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

11-228

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |                |   |                       |                                       |              |                  |        | SMALL ENTITY TYPE  |                        |          | OTHER THAN OR SMALL ENTITY |                        |
|--|----------------|---|-----------------------|---------------------------------------|--------------|------------------|--------|--------------------|------------------------|----------|----------------------------|------------------------|
| TOTAL CLAIMS   |                |   | 8                     |                                       |              |                  | ]      | RATE               | FEE                    | ריי<br>ר | RATE                       | FEE                    |
| FOR  |                |   | NUMBER FILED          |                                       | NUMBER EXTRA |                  |        | BASIC FE           | E 385.00               | OR       |                            |                        |
| TOTAL CHARGEABLE CLAIMS  |                |   | g minus 20=           |                                       | * <i>9</i>   |                  |        | X\$ 9=             |                        | OR       | X\$18=                     | 0                      |
| INDEPENDENT CLAIMS   |                |   | / m                   | inus 3 =                              | • 0          |                  |        | X43=               | ·                      | 1        | X86=                       |                        |
| М  | JLTIPLE DEPE   | NDENT CLAIM P                             | RESENT                |                                       |              |                  | 1 1    |                    | <del> </del>           | OR       |                            | ν <sup>7</sup> .       |
| * 11   | the difference | e in column 1 is                          | less than z           | ero, enter                            | "0" in (     | column 2         | ' I    | +145=              | ·                      | OR       | +290=                      | ن.                     |
| CLAIMS AS AMENDED - PART II  |                |   |                       |                                       |              |                  |        | TOTAL              |                        | OR       | TOTAL OTHER                | 770                    |
|  |                | (Column 1)                                | (Column 2) (Column 3) |                                       |              |                  | · · ·_ | SMALL              | ENTITY                 | OR       | SMALL I                    |                        |
| AMENDMENT A  |                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                       | HIGHE<br>NUME<br>PREVIO<br>PAID F     | BER<br>USLY  | PRESENT<br>EXTRA |        | RATE               | ADDI-<br>TIONAL<br>FEE |          | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total          | *   | Minus                 | **                                    |              | =                |        | X\$ 9=             |                        | OR       | X\$18=                     |                        |
| AME  | Independent    | *   | Minus                 | ***                                   | <u> </u>     | =                |        | X43=               |                        | OR       | X86=                       | ·                      |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |                |   |                       |                                       |              |                  |        | +145=              |                        | OR       | +290=                      |                        |
|  |                |   |                       |                                       |              |                  | L      | TOTAL              |                        |          | TOTAL                      |                        |
|  |                | (Column 1)                                |                       | (Colum                                | n 2)         | (Column 3)       | - A    | DDIT. FEE          | L                      | ,        | ADDIT FEE                  |                        |
| AMENDMENT B  |                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                       | HIGHE<br>NUMB<br>PREVIOU<br>PAID F    | ER<br>JSLY   | PRESENT<br>EXTRA |        | RATE               | ADDI-<br>TIONAL<br>FEE |          | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total          | *   | Minus                 | ##                                    |              | =                |        | X\$ 9=             |                        | OR       | X\$18=                     |                        |
|  | Independent    | *   | Minus                 | ***                                   |              | =                |        | X43=               |                        | OR       | X86=                       |                        |
|  | FIRST PRESE    | NTATION OF MU                             | LIPLE DEP             | ENDENT                                | CLAIM        |                  |        | +145=              |                        | OR       | +290=                      |                        |
|  |                |   |                       |                                       |              |                  | · A[   | TOTAL<br>DDIT. FEE |                        | OR A     | TOTAL<br>DDIT. FEE         | •                      |
| -  |                | (Column 1)<br>CLAIMS                      |                       | (Columi                               |              | (Column 3)       |        |                    | • .                    |          |                            |                        |
| MEN  |                | REMAINING<br>AFTER<br>AMENDMENT           |                       | HIGHE:<br>NUMBE<br>PREVIOU<br>PAID FO | ISLY         | PRESENT<br>EXTRA |        | RATE               | ADDI-<br>TIONAL<br>FEE |          | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total          | *   | Minus                 | **                                    |              | =                |        | X\$ 9=             |                        | OR       | X\$18=                     |                        |
|  | Independent    | 1   | Minus                 | ***                                   |              | =                |        | X43=               |                        |          | X86=                       |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |                |   |                       |                                       |              |                  |        |                    |                        | OR       |                            |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                |   |                       |                                       |              |                  |        |                    |                        |          |                            |                        |